

OFFICE USE ONLY:

Application Number:_____

Approved: ☐ CRS ☐ FCPA ☐ FCPS

Deposit: Received _____ Refunded _____

Fairfax County Department of Community and Recreation Services (CRS)

12011 Government Center Parkway, Suite 1050

Fairfax, Virginia 22035-1115

(703) 324-5533 / (703) 324-5522

(703) 324-5546 FAX

Application for Community Use of Public Athletic Facilities

TOURNAMENT APPLICATION

- All information must be completed before the application can be processed. ***Incomplete applications will not be processed and will be returned to the applicant for completion.***
- Applications must be filed with the CRS Athletic Services Division by the deadlines listed below. ***Late tournament applications will be processed on a space available basis.***
- Applicants must be residents of Fairfax County.
- **A separate application must be submitted for each tournament.**

PLEASE CHECK THE SEASON FOR WHICH YOU ARE APPLYING.

| Field Season Dates | | Field Tournament Application Deadline | Gymnasium Season Dates | | Gymnasium Tournament Application Deadline |
|--------------------------|------------------------------|---------------------------------------|--------------------------|---------------------------------|---|
| <input type="checkbox"/> | Spring: March 1 – June 14 | October 1 for all seasons | <input type="checkbox"/> | Spring: April 1 – June 15 | March 1 |
| <input type="checkbox"/> | Summer: June 15 – July 31 | | <input type="checkbox"/> | Summer: June 16 – August 31 | May 1 |
| <input type="checkbox"/> | Fall: August 1 – November 15 | | <input type="checkbox"/> | Fall: September 1 – November 30 | August 1 |
| | | | <input type="checkbox"/> | Winter: December 1 – March 31 | October 1 |

Tournament Date(s): _____

Tournament Entry Deadline: _____

Tournament Name:_____

Sport:_____

Applicant Name:_____

Applicant E-mail:_____

Applicant Address:_____

City, State, Zip:_____

Applicant Office Phone:_____

Applicant Home Phone:_____

Tournament Website:_____

Organization Sponsoring Tournament:_____

Tournament Director:_____

Director E-mail:_____

Director Office Phone:_____

Director Home Phone:_____

Tournament Information

Expected Number of Teams By Jurisdiction:

Fairfax County:_____

Other jurisdictions:_____

Does your organization have liability insurance for the tournament?

☐YES ☐NO

Is the tournament being operated by a third party (ie. event management company)?

☐YES ☐NO

Will vendors be selling food at any location?

☐YES ☐NO

Will vendors be selling merchandise at any location?

☐YES ☐NO

Will there be on-site amusement/entertainment activities during this tournament?

☐YES ☐NO

Will amplified sound be used during this tournament?

☐YES ☐NO

Financial Information

Entry Fee: \$_____ per team

Total Expected Revenue: \$_____

Total Entry Fees \$_____

Total Sponsor Donations \$_____

**Application for Community Use of Public Athletic Facilities
FACILITY REQUEST**

Tournament Name: _____

Sport: _____

Tournament Date(s): _____

Type of Facility Requested: ☐ Field ☐ Gymnasium

Please list the facilities that you are requesting for your tournament, in order of preference:

| Facility Name | Facility Number | Day(s) of the Week | Start Time | End Time |
|---------------|-----------------|--------------------|------------|----------|
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Please list all non-County facilities that you will be using for this tournament:

| Facility Name | Facility Number | Day(s) of the Week | Start Time | End Time |
|---------------|-----------------|--------------------|------------|----------|
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**Application for Community Use of Public Athletic Facilities
STATISTICAL INFORMATION**

Tournament Name: _____

Sport: _____

Type of Facility Requested: ☐ Field ☐ Gymnasium

Please provide information on the number of registered players:

| AGE | Prior Year _____ Tournament Actuals | | | | Current Year _____ Tournament Estimates | | | |
|----------------------|-------------------------------------|------|--------|------------|---|------|--------|------------|
| | PLAYERS | | TOTALS | | PLAYERS | | TOTALS | |
| | Female | Male | County | Non-County | Female | Male | County | Non-County |
| 4 | | | | | | | | |
| 5 | | | | | | | | |
| 6 | | | | | | | | |
| 7 | | | | | | | | |
| 8 | | | | | | | | |
| 9 | | | | | | | | |
| 10 | | | | | | | | |
| 11 | | | | | | | | |
| 12 | | | | | | | | |
| 13 | | | | | | | | |
| 14 | | | | | | | | |
| 15 | | | | | | | | |
| 16 | | | | | | | | |
| 17 | | | | | | | | |
| 18 | | | | | | | | |
| Adults | | | | | | | | |
| Total Players | | | | | | | | |

| Prior Year Tournament Actuals | Current Year Tournament Estimates |
|-------------------------------|-----------------------------------|
| Number of Female Teams: _____ | Number of Female Teams: _____ |
| Number of Male Teams: _____ | Number of Male Teams: _____ |
| Number of Coed Teams: _____ | Number of Coed Teams: _____ |
| Number of Spectators: _____ | Number of Spectators: _____ |
| Number of Vendors: _____ | Number of Vendors: _____ |


**Application for Community Use of Public Athletic Facilities
AGREEMENT**

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The undersigned, as an agent for the organization or group of individuals requesting facility allocation(s), have read the rules and regulations governing facility use and permitting and agree to abide by all stated rules and agrees to enforce said rules and regulations. Violation of any rule or condition of the Permit is cause for immediate revocation of the Permit, loss of permit privileges, and forfeitures of any fees/deposits paid for the Permit. Any individual or team, which fails to abide by any and all rules and regulations, is subject to suspension, ineligibility and/or other penalties that may be imposed by County officials.

The undersigned certifies and/or agrees that he/she:

- Is familiar with the rules and regulations of the Fairfax County School Board, Park Authority, Community and Recreation Services and the Northern Virginia Regional Park Authority for community and local use of public athletic facilities.
- Will maintain a participant roster for all teams that is in compliance with Fairfax County residency requirements.
- Will be fair and equitable in the distribution of facilities and will make decisions without regard to race, culture, age, gender or religion.
- Will permit facilities specified as "primary use" to teams participating in those sports in which that facility was intended.
- Is the sole applicant from this group for athletic facilities in Fairfax County.
- Accepts, for the user, the full responsibility for any and all damages to school, park and County property caused by said user, and for prompt and proper settlement of claims for such damage.
- Agrees to provide reasonable accommodations for athletes, coaches, and spectators with disabilities to include: rescheduling games or practices to accessible fields and providing information in alternative formats.
- On behalf of the designated user agrees to hold harmless and indemnify the Fairfax County School Board, the County of Fairfax, the Board of Supervisors of Fairfax County, Virginia, the Fairfax County Park Authority, the Northern Virginia Regional Park Authority, and all of their officials, officers, employees or agents, with respect to any claim of loss, injury, or damage because of negligence of the user or user's employees or agents, including damage to School Board, County and park property or other public property.

In accordance with the Virginia Privacy Protection Act of 1976, the requested information will be used to coordinate activities of this agency. Some of the information contained in this form may be released to persons who request such information in accordance with the requirements of the Virginia Freedom of Information Act, Va. Code Ann. Section 2.1-340.1.

 **Americans with Disabilities Act:** CRS is committed to nondiscrimination in all programs, services, and activities. Special accommodations/alternative information formats will be provided upon request. Please call the information number (703) 324-5532 at least 10 working days in advance of the registration deadline or event. TTY (703) 222-9693.

Notice: CRS shall have the right to deny the use of a facility to any person or organization at any time. The CRS Director administers and interprets the policy governing use of public facilities and determines the appropriate procedures needed for implementation. CRS has the right to deny the privilege of continued use of facilities to any user who does not comply with all the regulations. By signing this agreement you as a representative of the organization or group agree to abide by the conditions of this facility use agreement.

Signature of Applicant: _____ Date _____

Office Use Only

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|---|--|
| _____ Submission of tournament deposit (\$\$\$\$) | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Approval from FCPA/FCPS for vendors/entertainment | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Arrangements for portable restroom facilities | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Arrangements for dumpsters | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Permit from Health Department for food vendors | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Arrangements with Police Department for traffic control | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Arrangements for off-site parking | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Other _____ | <input type="checkbox"/> YES <input type="checkbox"/> No |
| _____ Other _____ | <input type="checkbox"/> YES <input type="checkbox"/> No |